

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/476,468	12/30/99	379	2742	10205.020

APPLICANT

SAMUEL L. THOMASSON, GILBERT, AZ.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

*JFH*

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

*JFH*

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

*JFH*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/09/00 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	Sheets Drawing	Total Claims	Independent Claims
Verified and Acknowledged	<i>JFH</i>	Examiner's Initials	Initials	AZ	4	12	4

ADDRESS

PAUL F WILLE  
6407 EAST CLINTON STREET  
SCOTTSDALE AZ 85254

TITLE

BAND-BY-BAND FULL DUPLEX COMMUNICATION

FILING FEE RECEIVED  \$384	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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